

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

J. D. DUNSHEE, M.D., Director

Weekly Bulletin

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Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912.
Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. XIII, No. 19

June 9, 1934

GUY P. JONES
EDITOR

Infantile Paralysis

A Message to Parents and Patients

By JOHN RUHRAH, M.D., Member of Special Committee on Poliomyelitis, American Medical Association, University of Maryland School of Medicine, Baltimore

Infantile paralysis (epidemic poliomyelitis) is a communicable disease most commonly seen in children. Young grown-ups may have it and so may anyone, no matter what his age.

A person with infantile paralysis should be isolated from others for at least three weeks. This helps decrease the spread of the disease and gives the patient complete quiet and rest when it is most needed.

The disease starts with a fever, which may be followed in a few days by paralysis. This paralysis may be slight or very severe. If the patient gets better the paralysis tends to clear up, but no two cases are exactly alike. One may recover the use of all his muscles while another may remain paralyzed.

In order to get the best results all cases should be managed as if they are going to get better, because paralyzed muscles may be damaged by improper handling and a lack of care. This care should begin as soon as the paralysis is noted.

Three things must be borne in mind: (1) the prevention of deformities, (2) the protection of the muscles from the injury caused by stretching and fatigue, and (3) the subsequent reeducation of the paralyzed muscles.

PREVENTION OF DEFORMITIES

To prevent deformities the child should be placed on a firm mattress. Do not use pillows under the head or limbs. The body should be flat down on the bed and straight out as the body is when one is standing. The patient should not be allowed to sit up in bed, nor in a wheel chair until the doctor permits it.

Pain is best relieved by putting the child in a brace or in a plaster cast, which can be cut so that the child can be taken out for bathing and later on for exercise. These braces, splints or casts keep the muscles quiet and at rest but they may have to be changed or adjusted from time to time.

Rest—Lying in bed for many months is one of the most important things in severe cases. The length of time the child must rest differs in nearly every case.

Bathing—The patient should be bathed daily. Children may be lifted into a tub of warm water at about 95 degrees Fahrenheit. This warm bath is very comforting to the patient. A couple of handfuls of salt may be added to the bath water. Take care in lifting a child that the paralyzed limbs do not hang down or dangle. If the patient is able, a very little motion may be permitted in the bath. Adults may be bathed on the bed.

Warmth—Keep the paralyzed parts warm. This helps the circulation, it helps recovery and also aids in the growth of the limb. Later, during convalescence, always warm the part before exercise.

EXERCISE

After several months rest, if the doctor thinks the patient is ready for it, the muscles may be exercised and reeducated. Rest is more important than exercise while recovery is taking place, but enough motion to prevent stiffness may be allowed.

Exercise may be given in the bath, on a smooth table or on the bed, with the limb resting on a smooth, well powdered board. A sewing board is useful for this.

Never bend a limb as far as it will go. Always start with a little motion, and then move the limb back to where it started, that is, complete the motion. Only the weak muscles are to be exercised, as the aim is to make the weak ones stronger and to prevent the strong ones from pulling against or stretching the weak ones.

The patient should keep his mind on what he is trying to do. He should always "will" the motion whether he can make it or not.

Do not allow a muscle to get tired. Too much exercise is worse than none. Fatigue is dangerous—avoid it. Do too little rather than too much.

The exercise should be carried out as the doctor directs. Incorrect exercise may do much harm.

Do not try to see how much the patient can do.

Do not allow the patient to bear weight on his legs as long as there is any hope of his getting better leg muscles.

RECOVERY

Recovery is usually slow. It may take months or years before the patient has recovered as much as he will.

Patience and keeping on with what is known to be right is often rewarded with success, either complete or partial.

This patient effort may enable the person to go without braces later. Braces may be needed to protect the muscles and to enable the patient to walk. Do not be in a hurry to get these—a year, two years, three or even more years spent in proper treatment may enable the child to get along without braces.

Fresh air, sunshine and good food are all important but do not feed the child so much that he gets fat. Fat adds to the weight the muscles must move and interferes with the best use of the muscles.

THE MENTAL SIDE

The child should not be humored or spoiled. Do

not express your pity, lest the child get to pity himself. Self-pity is a most destructive thing for anyone. Provide suitable amusements, games, a radio, music or visitors. These help to pass the time. However, amusements should not be overdone. Lessons may be studied if the child is of school age.

Remember proper mental rest is as essential as physical rest. Teach the child self-reliance. Teach him to understand that even if he is paralyzed he can make a place for himself in the world.

DOCTOR AND FAMILY MUST WORK TOGETHER

A good doctor will help you with the treatment, a good visiting nurse will help, an expert in muscle training is a great benefit, but such experts are not easy to find. Remember the most important part of the care comes from the family. The mother or some one else in the family must accept her share of the responsibility and it is on her that the success or failure of the treatment will largely depend. The day-in and day-out care is, after all, the important thing. The patient may be handicapped; teach him to make the most of it. Accept the handicap and make the most of it yourself. Let it act as a spur rather than a brake.

WARNING

Avoid people who guarantee to promise to cure infantile paralysis.

A good doctor may help your child but he can not promise a complete cure. Do not get restless and want to change your doctor or clinic because the improvement is slow.

Remember that the future of your child depends on his getting the proper early care and in keeping it up without any interference or breaks.

Remember one careless period may undo months of patient work.

Have courage and patience and carry out faithfully the doctor's orders.

REMEMBER THAT EVEN IF A PERSON IS PARTIALLY PARALYZED HE MAY LEAD A HAPPY USEFUL LIFE. THERE ARE MANY EXAMPLES, NONE BETTER THAN PRESIDENT ROOSEVELT.

DOCTOR HIERONYMUS RESIGNS

Dr. Arthur H. Hieronymus, who has been city health officer of Oakland for several years, has resigned, such resignation to become effective June 11. He is succeeded by Dr. N. N. Ashley.

Dr. Hieronymus is one of the most capable health officers in California, and he succeeded in raising

standards in his city's public health during the three years of his incumbency. In 1931, Oakland was seventeenth in the inter-chamber health contest sponsored by the United States Chamber of Commerce, and in 1933 the city had advanced to third place. The record made by Dr. Hieronymus as health officer of Oakland is most commendable, and the city is fortunate to have had the advantages that accrued during his service.

OAKLAND CHAMBER OF COMMERCE STIMULATES PUBLIC HEALTH

For three years the public health committee of the Oakland Chamber of Commerce has worked with the city health department to secure a higher standard of public health in that city. As a result of the activities undertaken, Oakland advanced from seventeenth place in 1931, in the inter-chamber health contest sponsored by the United States Chamber of Commerce, to third place in the 1933 contest. The committee is now laying plans to correct deficiencies to enable the city to obtain first place in the 1934 competition.

At a recent meeting of the committee, activities of an organized group of business men were recognized as of the greatest value in the development of community health. The committee believes that the health officer in each community should have an opportunity to call upon local business men for support and with an organized group available he is able to accomplish more for community betterment than he could possibly do single-handed.

CHULA VISTA CONTROLS DOGS

Dr. F. E. Ashcroft, city health officer of Chula Vista, in San Diego County, reports that out of 375 dogs that have been licensed in Chula Vista 315 have been vaccinated against rabies. This result comes after the vigorous campaign following a human death from rabies in San Diego County. The veterinarians of the county assisted in this campaign by reducing the vaccination fees to a minimum. At the present time, the Chula Vista city council is considering the enactment of an ordinance which would require vaccination against rabies as a prerequisite for obtaining a dog license.

If a child is hampered by susceptibility to disease, physical defects, or bad habits of living, he can never meet with much success in his intellectual work, and, if he could his achievements would be of little value to him in life without physical vigor.—Frank Pierrepont Graves (1932).

AN OUTLINE OF THE LAWS OF CALIFORNIA WITH REGARD TO PUBLIC HEALTH PROCEDURES

LESSON VI

GENERAL SANITATION

1. What does the State Department of Public Health do in the interest of food sanitation?

It makes inspections regularly of restaurants, soft drink stands and refreshment booths along the State highways in both incorporated and unincorporated districts of the State.

2. What sort of service does such inspection provide?

It provides for proper toilet facilities, adequate sewage disposal, proper disposal of garbage, rubbish and other waste, the provision of pure water supplies and the provision of screens and control measures against flies and other insects.

3. Are common towels permitted?

The use of common towels in public places is prohibited by law.

4. Are common drinking cups permitted?

No. The use of common drinking cups in public places is also prohibited by law.

5. Are activities directed against rodents?

Yes. Control of both rats and ground squirrels for the protection of public health is carried on continuously by the Bureau of Sanitary Inspections.

6. Why are rats and ground squirrels dangerous to the public health?

Because many of them are infected with bubonic plague, which may be transmitted to human beings through the bite of the rat-flea which commonly infests both rats and ground squirrels.

7. Are complaints of insanitary conditions handled by the State Department of Public Health?

Yes. The department's Bureau of Sanitary Inspections is prepared to investigate and, if necessary, abate any insanitary conditions that may be reported in any part of the State.

8. Are sanitary surveys made by the bureau?

Yes. Sanitary surveys of communities and institutions are made upon the request of local health officers who may desire such assistance.

9. Are efforts made in the control of dogs?

Yes. When rabies may occur, the bureau assists local health officers in placing dogs under proper control in order to prevent the spread of the disease.

(Lesson VII will appear next week)

MORBIDITY***Chickenpox**

260 cases of chickenpox have been reported, as follows: Alameda County 1, Berkeley 3, Fresno County 5, Fresno 9, Oakland 25, Piedmont 1, Kern County 1, Lake County 3, Los Angeles County 25, Alhambra 1, Beverly Hills 1, Burbank 1, Glendale 5, Huntington Park 1, Los Angeles 51, Manhattan Beach 6, Monrovia 1, Pasadena 10, Redondo 2, Santa Monica 2, South Pasadena 1, Whittier 1, Hawthorne 3, South Gate 2, Bell 2, San Rafael 5, Monterey County 1, King City 1, Orange County 2, Roseville 1, Riverside County 1, Riverside 2, Sacramento County 2, Sacramento 4, Ontario 1, San Diego 14, San Francisco 28, San Joaquin County 5, Stockton 6, San Luis Obispo County 3, Paso Robles 1, San Luis Obispo 3, Burlingame 1, Daly City 2, Santa Barbara County 1, Lompoc 4, Santa Clara 1, Solano County 1, Sonoma County 1, Modesto 1, Lindsay 1, Santa Paula 1, Marysville 3.

Diphtheria

26 cases of diphtheria have been reported, as follows: Oakland 1, Los Angeles County 2, Compton 1, La Verne 1, Los Angeles 13, Monrovia 1, Monterey Park 1, Sacramento County 1, San Bernardino County 1, San Joaquin County 1, San Jose 1, Vallejo 1, Santa Rosa 1.

German Measles

170 cases of German measles have been reported, as follows: Oakland 2, Contra Costa County 2, Fresno County 14, Hanford 1, Lake County 3, Los Angeles County 32, Alhambra 7, Burbank 4, Compton 2, Culver City 1, Glendale 1, Huntington Park 2, Los Angeles 24, Pasadena 10, Pomona 4, San Fernando 1, San Gabriel 1, Whittier 4, Monterey Park 2, Maywood 2, Bell 1, Madera County 10, Orange County 9, Anaheim 1, Brea 2, Orange 2, Santa Ana 3, Laguna Beach 2, San Clemente 2, Sacramento County 8, Sacramento 2, San Diego 1, San Francisco 1, San Luis Obispo County 3, Sunnyvale 1, Tulare County 1, Dinuba 2.

Influenza

24 cases of influenza have been reported, as follows: Oakland 1, Los Angeles 18, Roseville 1, San Francisco 2, Tehama County 2.

Measles

912 cases of measles have been reported, as follows: Alameda County 15, Alameda 6, Albany 26, Berkeley 38, Hayward 4, Oakland 86, Piedmont 1, Contra Costa County 17, Hercules 2, Richmond 12, Walnut Creek 25, Eldorado County 1, Fresno County 1, Fresno 6, Humboldt County 1, Bakersfield 1, Los Angeles County 19, Alhambra 3, Beverly Hills 2, Glendale 2, Long Beach 5, Los Angeles 15, Monrovia 2, Montebello 1, Pasadena 9, San Fernando 1, Santa Monica 1, Whittier 1, Monterey Park 1, Madera County 2, Gustine 2, Modoc County 1, Salinas 1, Napa 1, Orange County 4, Santa Ana 1, La Habra 3, Laguna Beach 2, Placentia 1, Roseville 48, Riverside County 6, Riverside 2, Sacramento County 3, San Bernardino County 1, Colton 3, San Diego County 3, Escondido 6, National City 2, San Diego 5, San Francisco 279, San Joaquin County 6, Stockton 7, San Luis Obispo County 6, San Mateo County 8, Burlingame 3, Daly City 4, Redwood City 3, San Mateo 2, South San Francisco 4, Menlo Park 1, Santa Barbara County 30, Lompoc 2, Santa Maria 2, Santa Clara County 33, Palo Alto 53, San Jose 10, Vallejo 5, Stanislaus County 27, Turlock 12, Yuba City 1, Tulare County 2, Ventura County 2, Fillmore 8, Yolo County 1.

Mumps

283 cases of mumps have been reported, as follows: Alameda County 2, Alameda 4, Berkeley 5, Oakland 40, Martinez 2, Fresno County 1, Humboldt County 13, Eureka 2, Los Angeles County 4, Compton 3, Culver City 1, Glendale 2, Long Beach 1, Los Angeles 29, Pasadena 2, Pomona 3, South Pasadena 1, Whittier 3, Bell 1, San Rafael 1, Orange County 2, Anaheim 2, Orange 3, Santa Ana 3, Tustin 1, Sacramento County 3, Sacramento 6, San Bernardino 3, Escondido 1, San Diego 2, San Francisco 91, San Joaquin County 5, Stockton 5, Daly City 11, South San Francisco 1, Santa Clara County 3, San Jose 3, Santa Clara 1, Santa Cruz County 2, Watsonville 8, Solano County 1, Stanislaus County 3, Lindsay 1, Tuolumne County 1, Ventura County 1.

Pneumonia (Lobar)

26 cases of lobar pneumonia have been reported, as follows: Berkeley 1, Oakland 1, Chico 1, Richmond 1, Eureka 1, Los Angeles County 1, Los Angeles 4, Monrovia 1, Pasadena 1, Pomona 1, Redondo 1, Sacramento 3, San Diego County 1, Escondido 2, National City 2, San Diego 1, San Mateo County 1, San Jose 1, Watsonville 1.

Scarlet Fever

144 cases of scarlet fever have been reported, as follows: Alameda County 1, Alameda 8, Berkeley 1, Oakland 6, Fresno County 1, Humboldt County 2, Kern County 5, Bakersfield 1, Los Angeles County 27, Burbank 1, Glendale 3, Long Beach 2, Los Angeles 23, Monrovia 2, Pomona 2, Redondo 1, Maywood 3, Merced 1, Orange County 3, Riverside County 2, Corona 1, Riverside 1, Sacramento County 1, Sacramento 1, Colton 3,

San Bernardino 1, San Diego 5, San Francisco 12, San Joaquin County 2, Manteca 1, San Luis Obispo County 1, Burlingame 1, Redwood City 1, Santa Barbara County 3, San Jose 5, Willow Glen 1, Watsonville 1, Yreka 1, Stanislaus County 1, Corning 2, Tulare County 1, Exeter 1, Fillmore 1, Yolo County 1.

Smallpox

One case of smallpox from San Bernardino has been reported.

Typhoid Fever

3 cases of typhoid fever have been reported, as follows: Los Angeles County 1, San Joaquin County 2.

Whooping Cough

272 cases of whooping cough have been reported, as follows: Alameda County 7, Alameda 5, Albany 1, Berkeley 11, Oakland 10, Martinez 4, Pittsburg 1, Fresno County 3, Fresno 1, Humboldt County 6, Eureka 4, Calexico 1, Los Angeles County 19, Alhambra 4, Compton 4, Glendale 8, Huntington Park 1, Long Beach 8, Los Angeles 33, Monrovia 2, Pasadena 11, Pomona 1, Redondo 1, San Marino 1, Santa Monica 5, Torrance 1, South Gate 2, Monterey Park 2, Madera County 6, Madera 1, Merced County 1, Merced 1, Orange County 3, Orange 1, Roseville 2, Corona 1, Riverside 4, Sacramento County 4, Sacramento 1, San Bernardino County 12, Ontario 1, San Bernardino 3, San Diego 8, San Francisco 7, San Joaquin County 7, Lodi 3, Stockton 22, Tracy 2, San Luis Obispo County 1, San Luis Obispo 3, San Mateo County 4, Daly City 2, San Jose 1, Santa Cruz County 1, Dunsmuir 1, Solano County 1, Stanislaus County 6, Tehama County 1, Red Bluff 1, Ventura County 3.

Meningitis (Epidemic)

2 cases of epidemic meningitis have been reported, as follows: Long Beach 1, San Diego 1.

Dysentery (Amoebic)

3 cases of amoebic dysentery have been reported, as follows: Los Angeles 2, Santa Barbara County 1.

Dysentery (Bacillary)

7 cases of bacillary dysentery have been reported, as follows: Huntington Park 1, Los Angeles 2, Sacramento 1, San Mateo County 2, San Jose 1.

Poliomyelitis

160 cases of poliomyelitis have been reported, as follows: Alameda County 1, Berkeley 1, Fresno 1, Los Angeles County 20, Alhambra 1, Beverly Hills 4, Glendale 2, Huntington Park 1, Long Beach 4, Los Angeles 110, Montebello 1, Pasadena 3, San Fernando 1, San Gabriel 2, Santa Monica 2, South Pasadena 1, San Francisco 4, San Joaquin County 1.

Encephalitis (Epidemic)

One case of epidemic encephalitis from San Francisco has been reported.

Tetanus

One case of tetanus from Los Angeles has been reported.

Trachoma

3 cases of trachoma from Santa Barbara County have been reported.

Paratyphoid Fever

One case of paratyphoid fever from Upland has been reported.

Rocky Mountain Spotted Fever

One case of Rocky Mountain spotted fever from Modoc County has been reported.

Undulant Fever

One case of undulant fever from Los Angeles has been reported.

Tularemia

One case of tularemia from Montague has been reported.

Septic Sore Throat

2 cases of septic sore throat have been reported, as follows: Burbank 1, San Luis Obispo 1.

Rabies in Animals

14 cases of rabies in animals have been reported, as follows: Los Angeles County 3, El Monte 1, Glendale 1, Huntington Park 1, Los Angeles 4, Santa Monica 2, South Gate 1, San Mateo 1.

* Complete reports for above diseases for week ending June 2, 1934.